

MAY 17 1927

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Weekly

Bulletin

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Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.

Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. VI, No. 13

May 7, 1927

GUY P. JONES  
EDITOR

How to Camp  
And Keep Well.

Camping in the open has become a major recreational activity throughout the whole United States and on the Pacific Coast, where favorable weather conditions enable the camper to enjoy a longer season of outdoor life, hundreds of thousands of people, for at least a part of every year, eat and sleep under the poet's "broad and starry sky." The extent of camping in California may be learned by the statement of the United States District Forester in which it is declared that no less than 6,870,000 people entered the National Forests of California during the 1926 season, more than 6,000,000 of whom traveled by automobile. It is expected that more than 7,000,000 people will enter these playgrounds this season. The importance of the camping trip from the standpoint of personal and community health grows from year to year. The migration of millions of people away from the sanitary conveniences of the cities to unsewered open country involves a health hazard of first degree. It is believed that many who plan taking a camping trip this season will appreciate a few practical suggestions concerning the safeguarding of their health during vacation days and this article is designed to provide this information.

It has been determined that an annual vacation is an absolute necessity for the maintenance of individual efficiency, but everyone can not enjoy

or receive benefit from the same sort of vacation. Each individual should obtain a complete change from his usual mode of living. The man who engages in hard manual labor might well enjoy two weeks of physical relaxation and the man who is chained to a desk for fifty weeks of the year might well profit by taking two weeks of moderate exercise in the open air. Arbitrary, enforced application of a prescribed type of vacation is not desirable, however. It is better to follow individual tastes and do whatever one is inclined to do. People who live at or near sea level might well go to the mountains and people who live in the warm interior valleys might profitably spend their vacations in the cooler country along the coast. It is advisable to seek a location which provides a complete change of occupation, scenery and climate.

If the vacationist knows how to maintain a camp, living in the open is a valuable, health-promoting way to spend a vacation. If he does not know how to camp, however, the time may be productive of disastrous results. A sanitary camp is essential for the enjoyment of life in the open but, strange to relate, very few people know how to maintain a sanitary camp.

It is a mistake to carry camping equipment that is not absolutely necessary and it matters not how elaborate his camp equipment may be, unless the camper knows how to use it; luxurious utensils are no better than makeshift articles. People who drive expensive high powered cars, fitted



with every possible camping device, are often the very people who leave their camps in the worst possible sanitary condition. Disease is no respecter of campers and it is as likely to attack the motor camper as the itinerant hobo. Many campers, who are used at home to having every domestic service done for them, are not able to maintain a good camp for the simple reason that they do not know how to take care of themselves. The camper, who is accustomed, at home, to cook, sweep and wash the dishes, is far more accomplished and careful than is the person who at home has servants to perform all of these household tasks for him. This is, naturally, to be expected.

It must be understood that we assume the camper intends to take himself away to a region where there is no sanitary equipment whatsoever, no water faucets where piped water can be obtained at a simple twist of the wrist. This is an expedition into the wilderness where the many conveniences of modern city life are totally lacking. There is plenty of pure air and sunshine, but there are no sewers, nor is there a scavenger to remove garbage and refuse. When such conveniences are not at hand, the health responsibilities of the camper increase greatly—responsibilities not only for his own personal health, but also for the health of others. He can no longer depend upon his city to supply him with good drinking water nor to make proper disposal of wastes. He must do for himself these duties for the performance of which he has been depending upon his city government.

Every camper in the wilds should carry a spade. A spade is even more useful in a camping trip than an axe. It may be used for many purposes, such as digging trenches and leveling the camping site over which the tent may be pitched. From the standpoint of the sanitarian, a spade is an absolute necessity for maintaining camp sanitation in places where no sanitary equipment is provided. Carry a spade and use it for burying all remnants of food, empty tin cans, old bottles, body wastes, and other undesirable material of every description. Don't let camp garbage accumulate to attract flies and other insects. Bury it quickly and bury it deep. Pollution of any stream, lake or other body of water constitutes a violation of the law. For this reason, it is important that all camp wastes be buried at a distance, say, of twenty-five feet from any

stream or body of water, and it should always be buried deep enough that it can not be reached by animals or insects. A spade is useful, too, for putting out a campfire. The coals of a campfire, if buried under six or eight inches of dirt, have little chance to flare up and set fire to the forests. Many of the best camping spots in the western country have been destroyed by campers who were careless in putting out their campfires. If you want to keep your camping places for future use, do not burn them up.

If you drink pure water and bury all wastes, your camping trip will be a pleasure to you and to other campers. Leave your camping place as you would like to find it—carry a spade and use it—are the most important things for the camper in the wilderness to remember. Observance of these rules will add greatly to the health, happiness and comfort of all campers.



#### **Riverside Works For Child Health.**

The Riverside County Health Department, of which Dr. W. B. Wells is Health Officer, is accomplishing a large amount of work in the promotion of infant welfare. The public health nursing unit of the department during the month of March, 1927, made a total of 3346 visits of which 2372 were home visits. Of these 683 were to pre-school children, 303 to infants under one year of age and 70 were pre-natal visits. In the health and development division 12,497 children were inspected. Among these 756 physical defects were discovered, 125 of which were corrected and 371 children were referred to physicians, dentists and clinics.



#### **Imperial County In Rabies Campaign.**

Since the first of the year a large number of rabid dogs have been discovered in Imperial County. During the month of April sixteen individuals have been bitten by rabid animals. Twelve of these persons were bitten by a single rabid dog. Arrangements for the administration of the Pasteur treatment for the prevention of rabies were made by Dr. C. S. Brooks, County Health Officer, and all of the afflicted individuals are now receiving this protection at the expense of the county.



## SANITATION AND CONTROL OF DISEASE.

There is sometimes confusion in the minds of many people concerning the relationship that exists between insanitary environmental conditions and the contraction of communicable diseases. Sanitation is not always maintained for esthetic reasons alone. Certain communicable diseases are dependent upon lack of sanitation for their dissemination. The proper disposal of garbage, for instance, has a direct bearing in the prevention of plague, for it cuts off the food supply of the rat which is the arch-enemy in the spread of this disease. Environmental conditions, of course, play no part in the spread of those diseases which are communicated through direct contact, person to person.

In a lecture given before the public health nurses of San Jose, April 5th,

Dr. Allen F. Gillihan, State District Health Officer, used a syllabus which shows clearly the reasons for sanitation from the standpoint of communicable disease control. The figures in the third column of this syllabus refer to the numbered groups of diseases in the last column. For example, sewage needs to be disposed of properly in order to provide a safeguard against group (1) typhoid, cholera, diarrhea and dysentery. Good industrial conditions must be maintained to afford protection against group (5)—industrial occupational diseases and poisons.

It is believed that this syllabus may be useful to sanitary inspectors, public health nurses and others who may need a ready reference to the chief reasons for the maintenance of sanitary environmental conditions.

### Reasons for Sanitation.

As exemplified in the daily routine of the average worker, "Man is a gregarious animal whose tendency is to foul his abode."

This syllabus does not cover direct contact in communicable diseases.

<i>Divisions of Day</i>	<i>Necessitating Sanitation</i>		<i>Most Common Diseases</i>
<b>MORNING—</b>			
Awake			(1)
Bowels and Urine	Sewer and Sewerage	(1)	Typhoid
Wash	Water	(1)	Cholera
Breakfast	Food-milk-water	(1) (2) (3)	Diarrhœa
	Garbage	(4)	Dysentery
<b>FORENOON—</b>			
Work	Industrial	(5)	(2)
Urine	Sewage	(1)	Scarlet Fever
Wash	Water	(1)	Septic Sore Throat
Lunch	Food-milk-water	(1) (2) (3)	Malta Fever
	Garbage	(4)	Diphtheria
<b>AFTERNOON—</b>			
Work	Industrial	(5)	Tuberculosis
Refreshment	Food-milk-water	(1) (2) (3)	(3)
	Garbage	(4)	Botulism
Work	Industrial	(5)	Trichina
Urine	Sewage	(1)	Intestinal Parasites
Wash	Water	(1)	(4)
Dinner	Food-milk-water	(1) (2) (3)	Rats
	Garbage	(4)	Plague
<b>EVENING—</b>			
Recreation	Ventilation	(6)	(5)
	Mosquitos	(7)	Industrial Occupational
Urine	Sewage	(1)	Diseases and Poisons
Wash	Water	(1)	(6)
Sleep	Cubic Capacity	(6)	Tuberculosis
	Vermin	(8)	(7)
			Malaria
			Yellow Fever
			Dengue Fever
			(8)
			Plague
			Typhus

### MORBIDITY.\*

#### Diphtheria.

118 cases of diphtheria have been reported, as follows: Berkeley 4, Oakland 9, Imperial 3, Los Angeles County 6, Alhambra 3, Beverly Hills 1, Covina 2, Glendale 1, Long Beach 9, Los Angeles 55, San Fernando 1, Marin County 1, Placer County 1, Sacramento 4, San Diego 1, San Francisco 8, San Mateo County

\*From reports received on May 2d and 3d for week ending April 30th.

1, Redwood City 1, Yreka 1, Sonoma County 3, Stanislaus County 2, Sutter County 1.

#### Scarlet Fever.

186 cases of scarlet fever have been reported, as follows: Alameda 3, Berkeley 8, Livermore 1, Oakland 24, Piedmont 4, Colusa County 2, Antioch 4, Eureka 1, Inyo 2, Bakersfield 1, Los Angeles County 8 Alhambra 4, Arcadia 2, Covina 1, Glendale 3, Long Beach 7, Los Angeles 26, Monrovia 1, Pasadena 1, San Fernando 1, San Gabriel 1, Whittier 9, Hawthorne 1, Signal Hill 1, Madera County 1,



Grass Valley 2, Orange County 2, Anaheim 1, Brea 1, Fullerton 1, Huntington Beach 1, Santa Ana 1, Seal Beach 1, Placer County 1, Ontario 1, Rialto 1, San Diego 6, San Francisco 29, San Luis Obispo County 2, Burlingame 1, South San Francisco 1, Santa Barbara 1, Gilroy 1, Palo Alto 1, San Jose 8, Stanislaus County 1, Modesto 1, Tulare County 4.

#### Smallpox.

34 cases of smallpox have been reported, as follows: Oakland 19, Los Angeles County 2, Burbank 1, Mill Valley 1, Sausalito 4, Merced County 1, Riverside County 1, Sacramento 4, Sunnyvale 1.

#### Measles.

2378 cases of measles have been reported, as follows: Alameda 16, Berkeley 19, Oakland 87, Piedmont 3, El Dorado County 1, Glenn County 3, Orland 7, Eureka 7, Imperial 1, Bakersfield 1, Hanford 8, Lemoore 3, Los Angeles County 228, Alhambra 29, Arcadia 24, Beverly Hills 6, Burbank 7, Compton 45, El Monte 19, El Segundo 11, Glendale 161, Hermosa Beach 1, Long Beach 47, Los Angeles 401, Manhattan Beach 1, Monrovia 38, Pasadena 128, Pomona 56, Redondo Beach 2, San Fernando 4, San Gabriel 3, Sierra Madre 14, Whittier 2, Lynwood 1, Hawthorne 29, South Gate 1, Monterey Park 5, Maywood 1, Madera County 1, San Rafael 13, Sausalito 4, Merced County 5, Gustine 3, Monterey County 4, Carmel 17, King City 12, Grass Valley 2, Orange County 61, Anaheim 3, Fullerton 1, Orange 25, Santa Ana 48, Seal Beach 3, La Habra 2, Auburn 1, Riverside County 26, Banning 51, Beaumont 1, Elsinore 1, Riverside 29, San Jacinto 4, Sacramento 6, Chino 1, Ontario 5, Rialto 1, Upland 5, San Diego

County 53, Chula Vista 15, Coronado 14, National City 8, San Diego 271, San Francisco 96, San Luis Obispo County 3, Paso Robles 5, San Luis Obispo 2, San Mateo County 1, Burlingame 10, Redwood City 2, San Bruno 3, South San Francisco 1, Santa Barbara County 8, Santa Barbara 44, Santa Clara County 3, Gilroy 1, Los Gatos 8, Mountain View 8, Palo Alto 3, San Jose 2, Sunnyvale 1, Watsonville 5, Siskiyou County 1, Yreka 15, Stanislaus County 9, Turlock 1, Tulare County 2, Dinuba 5, Porterville 9, Visalia 1, Sonora 12, Yuba County 1.

#### Typhoid Fever.

9 cases of typhoid fever have been reported, as follows: Imperial 1, Los Angeles 3, Perris 1, Yolo County 1, California 3.

#### Whooping Cough.

207 cases of whooping cough have been reported, as follows: Alameda 7, Berkeley 26, Oakland 50, Los Angeles County 7, Alhambra 2, El Monte 1, Glendale 7, Long Beach 17, Los Angeles 25, Monrovia 2, Pasadena 6, San Gabriel 3, Torrance 1, Mill Valley 1, Orange County 5, Anaheim 2, Riverside County 6, Riverside 4, Chula Vista 1, San Diego 13, San Francisco 18, San Luis Obispo County 3.

#### Meningitis (Epidemic).

7 cases of epidemic meningitis have been reported, as follows: Los Angeles 2, Sacramento 2, San Francisco 2, Santa Barbara 1.

#### Encephalitis (Epidemic).

Two cases of epidemic encephalitis have been reported, as follows: Oakland 1, Glenn County 1.

### COMMUNICABLE DISEASE REPORTS.

Disease	1927				1926			
	Week ending			Reports for week ending April 30 received by May 3	Week ending			Reports for week ending May 1 received by May 4
	April 9	April 16	April 23		April 10	April 17	April 24	
Anthrax.....	0	0	0	0	0	0	0	0
Botulism.....	0	0	1	0	0	0	0	0
Chickenpox.....	624	428	492	487	284	313	291	264
Diphtheria.....	117	101	142	118	98	85	99	88
Dysentery (Bacillary).....	0	0	1	1	1	0	2	2
Encephalitis (Epidemic).....	3	3	4	2	0	3	1	0
Gonococcus Infection.....	82	81	106	93	95	74	83	105
Influenza.....	62	18	39	23	30	60	17	15
Jaundice (Epidemic).....	0	0	0	0	0	0	0	0
Leprosy.....	0	0	1	0	1	0	0	0
Malaria.....	1	1	2	0	1	2	0	0
Measles.....	3413	2613	2722	2378	195	231	319	370
Meningitis (Epidemic).....	10	6	11	7	2	8	2	2
Mumps.....	318	233	199	273	234	358	318	322
Paratyphoid Fever.....	0	1	4	0	0	1	1	0
Pneumonia (lobar).....	63	50	111	47	56	49	38	30
Poliomyelitis.....	2	1	3	0	2	2	1	3
Rabies (Animal).....	7	13	7	9	11	7	10	8
Rabies (Human).....	0	0	0	0	0	0	0	0
Rocky Mt. Spotted Fever.....	0	0	0	0	0	1	0	0
Scarlet Fever.....	233	195	198	186	101	133	114	116
Smallpox.....	42	28	45	34	82	86	103	61
Syphilis.....	162	85	92	131	181	123	85	110
Tetanus.....	0	1	1	1	0	2	1	0
Trachoma.....	3	0	1	39	1	5	2	2
Trichinosis.....	0	1	16	1	0	0	0	0
Tuberculosis.....	217	186	190	177	218	259	156	150
Typhoid Fever.....	6	11	18	9	12	76	17	15
Typhus Fever.....	0	0	0	0	1	0	0	0
Whooping Cough.....	196	130	204	207	83	50	76	62
Totals.....	5561	4186	4610	4223	1689	1928	1736	1725